

SHEBOYGAN FALLS 53085 Phone: (920) 467-4648  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 37  
Total Licensed Bed Capacity (12/31/01): 37  
Number of Residents on 12/31/01: 35

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? No  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 35

County  
FDDs

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		14.3
Supp. Home Care-Personal Care	No					1 - 4 Years		17.1
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	80.0	More Than 4 Years		68.6
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	11.4			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	5.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	2.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	0.0	65 & Over	20.0	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		4.3
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		19.9
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	42.9	Aides, & Orderlies		
Mentally Ill	No		-----	Female	57.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

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Method of Reimbursement

Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care					Total	%	
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Resi - dents	Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	34	100.0	145	0	0.0	0	1	100.0	200	0	0.0	0	0	0.0	0	35	100.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		34	100.0		0	0.0		1	100.0		0	0.0		0	0.0		35	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	20.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	11.4	54.3	34.3	35
Other Nursing Homes	20.0	Dressing	25.7	45.7	28.6	35
Acute Care Hospitals	0.0	Transferring	71.4	22.9	5.7	35
Psych. Hosp. -MR/DD Facilities	20.0	Toilet Use	22.9	54.3	22.9	35
Rehabilitation Hospitals	0.0	Eating	77.1	17.1	5.7	35
Other Locations	40.0	*****				
Total Number of Admissions	5	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.7	Receiving Respiratory Care		0.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	80.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	65.7	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		2.9
Acute Care Hospitals	33.3	Mobility		Receiving Tube Feeding		2.9
Psych. Hosp. -MR/DD Facilities	16.7	Physically Restrained	5.7	Receiving Mechanically Altered Diets		40.0
Rehabilitation Hospitals	0.0					
Other Locations	33.3	Skin Care		Other Resident Characteristics		
Deaths	16.7	With Pressure Sores	0.0	Have Advance Directives		17.1
Total Number of Discharges (Including Deaths)	6	With Rashes	0.0	Medications		
				Receiving Psychoactive Drugs		57.1

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Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

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	This Facility %	FDD Facilities %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.6	84.6	1.12	84.6	1.12
Current Residents from In-County	82.9	41.3	2.01	77.0	1.08
Admissions from In-County, Still Residing	80.0	17.0	4.70	20.8	3.84
Admissions/Average Daily Census	14.3	18.6	0.77	128.9	0.11
Discharges/Average Daily Census	17.1	22.2	0.77	130.0	0.13
Discharges To Private Residence/Average Daily Census	0.0	9.4	0.00	52.8	0.00
Residents Receiving Skilled Care	0.0	0.0	0.00	85.3	0.00
Residents Aged 65 and Older	20.0	15.8	1.26	87.5	0.23
Title 19 (Medicaid) Funded Residents	97.1	99.3	0.98	68.7	1.41
Private Pay Funded Residents	2.9	0.5	5.88	22.0	0.13
Developmentally Disabled Residents	100.0	99.7	1.00	7.6	13.19
Mentally Ill Residents	0.0	0.2	0.00	33.8	0.00
General Medical Service Residents	0.0	0.1	0.00	19.4	0.00
Impaired ADL (Mean) *	39.4	50.6	0.78	49.3	0.80
Psychological Problems	57.1	46.6	1.23	51.9	1.10
Nursing Care Required (Mean) *	5.7	11.0	0.52	7.3	0.78